STATEMENT OF ORGANIZATION		OFFICE USE ONLY Report Number: 40933
Name and Address of Committee	2. Date of this Statement	Date Filed: 5/2/2014
LOUISIANA ASSOCIATION OF SELF INSURED EMPLOYE 251 Florida Street Suite 314 Baton Rouge, LA 70801	1/31/2014	
	3. Estimated Membership	
	C	
Check If:	4. Amended Statement?	
New Committee	YesX_No	
All Committee Officers and Directors (including Chairperson, Treasurer a. <u>Name</u> b. <u>Position</u>	r, if any, and any other committee c. <u>Address</u>	e officers and directors)
Chairperson		
Treasurer		
6. Affiliated Organizations (Any organization other than a political committee, which directly or indirectly established, administers, or financially supports this committee.)		
a. <u>Name</u> b. <u>Address</u>		c. Relationship to Committee
7. All Depositories for Committee Funds (committee funds must be deposited in one or more banks or savings and loan institutions or money market mutual funds.)		
a. <u>Name</u> b. <u>Address</u>		
8. IF THIS COMMITTEE SUPPORTS A SINGLE CANDIDATE: a. Check one: Principal Campaign Committee Subsidiary Committee		
b. Name of Candidate	С	Office Sought by the Candidate
9. a. Name of Person Preparing Report		
b. Daytime Telephone		
10. WE HEREBY CERTIFY that the information contained in this STATEMENT OF ORGANIZATION is true and correct to the best of our knowledge, information and belief.		
This <u>2nd</u> day of <u>May</u> , <u>201</u>	4	
		005 000 0505
Gary Patureau Signature of Committee/Chairperson		225-338-0705 Daytime Telephone
Signature of Committee Treasurer, if any		Daytime Telephone

Form 200, Rev. 12/03